

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	yes
Computer Readable Form (CRF)?::	no
Number of copies of CRF::	
Title::	
Attorney Docket Number::	044158/273011
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	8
Small Entity::	No
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Elaine I.
Family Name:: Tuomanen
Name Suffix::
City of Residence:: Germantown
State or Province of Residence:: TN
Country of Residence:: US
Street of mailing address:: 9600 Dove Meadow Cove W.
City of mailing address:: Germantown
State or Province of mailing address:: TN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 38139

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Theresa M.
Family Name:: Wizemann
Name Suffix::
City of Residence:: North Potomac
State or Province of Residence:: MD
Country of Residence:: US
Street of mailing address:: 9 Peach Leaf Court
City of mailing address:: North Potomac
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20878

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	H. Robert
Family Name::	Masure
Name Suffix::	
City of Residence::	Germantown
State or Province of Residence::	TN
Country of Residence::	US
Street of mailing address::	9600 Dove Meadow Cove W.
City of mailing address::	Germantown
State or Province of mailing address::	TN
Country of mailing address::	US
Postal or Zip Code of mailing address::	38139

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Leslie S.
Family Name::	Johnson
Name Suffix::	
City of Residence::	Germantown
State or Province of Residence::	MD
Country of Residence::	US
Street of mailing address::	20147 Laurel Hill Way
City of mailing address::	Germantown
State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	20874

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Scott
 Family Name:: Koenig
 Name Suffix::
 City of Residence:: Rockville
 State or Province of Residence:: MD
 Country of Residence:: US
 Street of mailing address:: 10901 Ralston Road
 City of mailing address:: Rockville
 State or Province of mailing address:: MD
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 20852

Correspondence Information

Correspondence Customer Number:: 29312

Representative Information

Representative Customer Number:: 29312

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Divisional of	09/056,019	04/07/98

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: St. Jude Children's Research Hospital
Street of mailing address:: 332 North Lauderdale Street
City of mailing address:: Memphis
State or Province of mailing address:: TN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 38105-2794

Assignee name:: Medimmune, Inc.
Street of mailing address:: 35 West Watkins Mill Road
City of mailing address:: Gaithersburg
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20878

(If there is more than one assignee, repeat information for each one.)

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